



Dana E. Blackwell
Executive Director

LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

COMMISSIONERS:
CAROL O. BIONDI, VICE CHAIR
PATRICIA CURRY
HON. JOYCE FAHEY
BRENDA GALLOWAY
PHALEN G. HUREWITZ, ESQ.
HELEN A. KLEINBERG
DAISY MA, VICE CHAIR
CHRISTINA S. MATTINGLY
DR. LA-DORIS MCCLANEY
SANDRA RUDNICK
ADELINA SORKIN, LCSW/ACSW
DR. HARRIETTE WILLIAMS, CHAIR

APPROVED MINUTES

The General Meeting of the Commission for Children and Families was held on Monday, **November 15, 2004**, in room 140 of the Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles. **Please note that these minutes are intended as a summary and not as a verbatim transcription of events at this meeting.**

COMMISSIONERS PRESENT (Quorum Established)

Carol O. Biondi
Patricia Curry
Joyce Fahey
Phalen G. Hurewitz
Helen Kleinberg
Daisy Ma
Dr. La-Doris McClaney
Sandra Rudnick
Adelina Sorkin
Dr. Harriette Williams

COMMISSIONERS ABSENT (Excused/Unexcused)

Brenda Galloway
Christina S. Mattingly

APPROVAL OF THE AGENDA

The agenda for the November 15, 2004, meeting was unanimously approved.

APPROVAL OF MINUTES

The minutes of the October 4, 2004, general meeting were unanimously approved.

Commissioner Kleinberg asked that the minutes of the October 18, 2004, retreat be held until a description of the agreed-upon focus areas could be added.

The minutes of the November 1, 2004, general meeting were unanimously approved.

COMMITTEE REPORTS

Emancipation Committee

Commissioner Curry reported that at a recent retreat of the Emancipation Partnership, individuals expressed concerns about the confusion of roles resulting in part from departmental turnover. On Michael Olenick's resignation as head of the emancipation division, Gene Gilden took over as interim head, with Rhelda Shabazz assuming the position as of August 1. On the Service Integration Bureau's side, Sharon Watson's contract was up on July 1 and Kathy Saito is now in charge. The Service Integration Bureau (SIB) became involved in implementation because of departmental transitions, but it was agreed that implementation should return to the department, with SIB facilitating.

Despite these challenges, much has been accomplished. Three years ago, only one transitional resource center was open. Now there are eight, and the partnership wants to look at ways to address the overlapping areas of prevention, reunification, and permanency. Dave Mitchell of the Probation Department and Ms. Shabazz are working on a business plan with other departments and agencies involved in emancipation services, one that will be tied to all their budgets.

Because Dr. Sanders and the department have ultimate responsibility for how the budget is spent, it was agreed that Joan Smith would chair the budget committee. This will give the department oversight, yet still have the partnership involved and providing input. The tracking system instituted in October (under Greg Brewer) will also help the budget process, as it addresses the whole service issue—who is eligible for independent living programs (ILP), what services are being received, how old the recipients are, etc. Information is entered online in real time, when youth come to the TRCs and are served. A self-reporting process by the youth themselves will also be used to track outcomes.

Vice Chair Biondi asked how the tracking system will work—can Probation locate all 14-year-olds within the system, for instance? Close to 30,000 children are ILP-eligible, said Commissioner Curry, and information on them can be accessed by Probation officers at the transitional resource centers (TRCs). When youth come for services to the TRCs, they are asked to fill out the self-reporting forms, a system that may overcome many youths' reluctance to stay in touch.

Vice Chair Ma asked if the ages of ILP-eligible children are known, and Commissioner Curry said that information was available from Mr. Brewer. Historically, eligible children were not enrolled in the program, Commissioner Kleinberg said, sometimes because ILP did not have enough money. What is today's ratio? What factors prevent an eligible child from participating? Commissioner Curry said that the partnership's budget committee knows the numbers and is setting priorities for the finite number of dollars involved in funding different aspects of the program.

Commissioner Kleinberg asked about health insurance for emancipating youth, and Commissioner Curry explained that all Medicare-eligible individuals may keep that insurance until age 21; this can be arranged at the TRCs. Lisa Mandel assured Commissioners that attorneys are informing those leaving the system that they have this option. Commissioner Curry also mentioned continuing EPSDT eligibility, and her desire to get the Department of Mental Health more involved.

Chair Williams expressed her concerns that social workers may not know as much as they should about the process for moving a child to emancipation, which starts at age 14. Liaisons from the Community Colleges Foundation have found that line workers did not know they had to assign cases to the E-step program. Commissioner Curry acknowledged that training is an important topic for the Emancipation Partnership. It spent its first two years doing outreach to the community, the courts, and the regional offices, but worker turnover has lessened the impact of that outreach.

The first evaluation of E-step is expected soon, prior to that contract ending in mid-2005, which should help answer questions about continuing to spend \$2 to \$3 million on the program. The majority of those funds go to tutoring, and it is possible that a partnership with the Education Coordinating Committee could provide those services. If the contract is renewed, should the program scale back and serve fewer youth? If it is successful, will fewer slots be needed? Should funds be spent in this way or should schools and other departments be asked to provide assessments and tutoring? Chair Williams suggested that the issue be brought to the Commission once the evaluation has been reviewed.

Commissioner Sorkin raised the question of children in Kin-GAP, who are not assigned social workers, and the mechanisms for them to enter the emancipation program. ILP coordinators are supposed to refer them, but children are sometimes told they must be referred by a social worker. Training is key, Commissioner Curry stressed, because that information is incorrect.

Commissioner Sorkin brought up the issue of aftercare, citing scenes from a film that had been shown at a conference she attended. Both Commissioner Curry and Vice Chair Biondi agreed that the film-maker had erred in implying that a lack of aftercare services was to blame for the deaths of the children in the film, as they had been receiving housing and other extensive support services following their 'aging out' of the system. Vice Chair Biondi mentioned the legislation recently passed that requires adult connections for children, and Commissioner Rudnick noted Dr. Sanders's commitment to have youth emancipate with at least one adult permanently in their lives.

In response to a question from Commissioner Hurewitz, Commissioner Curry explained that the Commission's emancipation committee had ended over a year ago with its evolution into the Emancipation Partnership. The Commission has two seats on the partnership, but it is no longer a formal subcommittee under the Commission's oversight. Chair Williams suggested that the Commission look at this structural issue.

Child Care Policy Roundtable

Commissioner Sorkin reminded Commissioners that the Child Care Policy Roundtable, under the aegis of the Chief Administrative Office, meets monthly and is involved in several arenas, including legislative analysis and advocacy. Despite the governor's recent veto of many items, it is developing legislative strategies for the upcoming year, and is also working to identify the estimated cost of fully funding child care subsidies. Both in terms of legislation and budget, the Roundtable is concerned with child care not just for children birth to age 5, but for children up to age 12 or 13.

The Roundtable is exploring early childhood learning centers to see which model is best preparing children for school emotionally and cognitively, with the help of a RAND Corporation longitudinal study that is following children for three years, starting at age 3. The Roundtable is also testing program quality, visiting sites to see how they rate on environmental and licensing issues.

During her four years on the Roundtable preceding Commissioner Sorkin's tenure, Chair Williams said that the Roundtable spent some time every year studying legislation and making recommendations to the Chief Administrative Office (as any county body may) for the legislative report card. It also communicates its deliverables for the year to providers and other professionals, making public its goals and how its work is measured. She believes these are good practices that the Commission might consider.

With regard to the vetoed legislation, Commissioner Hurewitz suggested that communication with the education department be pursued—perhaps directly with Education Secretary Richard Riordan—to identify productive areas in which to lobby. Commissioner Sorkin said that legislative recommendations go through the county's legislative platform. Someone from the child care office is now the legislative liaison for the Department of Mental Health.

CHAIR'S REPORT

- Chair Williams thanked Vice Chair Biondi for chairing the last Commission meeting.
- The Commission's normal schedule in December includes one general meeting and the holiday luncheon. Commissioner Fahey, who is coordinating this year's luncheon, suggested the Epicenter restaurant on Hill Street, provided it is available on the desired date. Oath-administering ceremonies for the Board of Supervisors conflict with the tentative December 6 meeting date, but the Commission's readiness to launch new work in January is important, Chair Williams said, particularly after this morning's retreat follow-up meeting with Dr. Sanders, and the meeting on November 18 with the Board deputies.

Commissioners agreed on December 13 for both the general meeting (9:30 to 11:30 a.m.) and the holiday luncheon (12:00 noon). Directions will be provided once a location is confirmed.

DIRECTOR'S REPORT

- Carol Boone from the Casey Family Programs recently visited to discuss ideas for how Casey might support prevention efforts. A meeting is being planned with Commissioner Rudnick, several regional administrators, and some community providers to explore how Casey might be of assistance. Commissioner Hurewitz suggested including Lari Sheehan from the Service Integration Bureau, who Dr. Sanders said had already expressed interest.
- As of September, staffing levels are at an average of 123 percent, a number never seen before, according to Dr. Sanders. One hundred percent staffing equates to a caseload of 25 or 26 for a generic worker, and some offices have caseloads as low as 23 or 24. For implementation of point of engagement at Wateridge, staffing levels negotiated with labor needed to be at 120 percent, a level reached by nine or ten offices.

Now that staffing goals are being reached, Commissioner Hurewitz asked about redeployment, and Commissioner Kleinberg requested clarification on what the staffing calculations include, especially in view of the new process for concurrent planning where an emergency response worker, a field worker, and an adoptions worker may all be involved in a single case. Dr. Sanders explained that caseload figures include emergency response and adoptions workers, but not command post staff; the vast majority of social workers are generic. Part of the reason that staffing levels for point of engagement were set so high was a recognition of the additional work a generic worker would perform. Agreements have been reached with labor about new caseloads for adoptions workers as well, since caseloads include both children they work with and families that might become adoptive families. Commissioner Kleinberg asked if the ratio includes required multidisciplinary meetings, and Dr. Sanders confirmed that those are built into point of engagement and team decision-making. Caseloads will require constant study to determine if the balance is correct.

Commissioner Kleinberg asked about the command post, and whether it might move to a more regional level. Dr. Sanders said that there is no negotiated caseload for command post workers, whose role is similar to that of emergency response workers, and fluctuations in what comes through there have not yet been addressed.

- Four well-attended community meetings have been held regarding safe, stable homes and family preservation. If state and Federal dollars are included, approximately \$3 million is available for time-limited family reunification services, \$40 million for family preservation, \$3 million for family support, and \$4 million for adoption support. Providers may apply for as many as three contracts, and the department has contracted with the Department of Health Services to use **time-limited family reunification** funds for substance abuse services provided through community networks.

Family support will be targeted to three populations: teen parents, families generally struggling with parenting (self-referrals), and unfounded referrals to the department. (These are the same high-risk categories being addressed by First 5 L.A.'s Partnerships for Families program, and Commissioner Hurewitz suggested a collaboration.)

Outcomes are tied to the prevention of maltreatment, or to keeping families together. The structure of the contract may align to regional offices or to service planning areas, and is still under discussion.

Changes in the structure of **family preservation** include an allocation for alternative response for families reported to the department whose referrals are deemed inconclusive. Agencies will need the ability to deliver services 24 hours a day, seven days a week, to reduce the number of detentions ordered by the command post because of a lack of available services evenings and weekends. Mental health services are also necessary, but contracts with the Department of Mental Health have typically been underutilized (only half of \$3 million was spent) and other options are being explored. The geographic boundaries of family preservation may align with the 17 regional offices, thus strengthening those bonds and creating opportunities for 17 providers (possibly more in larger areas).

The availability of \$4 million for **adoption promotion and support** is a major change, providing new funds for pre- and post-adoption services that include therapy for families and children and strengthening adoption expertise within the therapeutic community. It is possible that four providers, each responsible for services within two service planning areas, will be awarded \$1 million each. Commissioner Hurewitz suggested the involvement of the Adoptions Committee in brainstorming ways in which the monies could be deployed, prior to the issuance of the RFP.

Commissioner Sorkin urged that the focus of adoption promotion efforts be on children of all ages, including permanently placed older children as well as younger children who may be more easily adopted. Dr. Sanders said that the focus will be on all children who have been freed for adoption; some children in permanent placements, for instance, have not been freed. He will ask staff to provide the Adoptions Committee with more details, which Commissioner Fahey agreed would be very helpful in promoting adoption for children who could be considered for it but are not yet freed, as with long-term foster-care or guardianship cases.

Chair Williams recalled that the Permanency Partners Program (P³) was limited to 50 cases. Are funds from any of these categories available for its expansion? Dr. Sanders said no, but that the P³ budget had increased to \$1 million, and other opportunities for funding might arise. He could not remember the precise number of potential P³ cases.

Commissioner Hurewitz recommended that departmental staff be made aware of Healthy Kids, a county program offering insurance to children whose families earn incomes less than 300 percent of the Federal poverty level, and who are therefore not eligible for Medi-Cal. That program began by serving children birth to age 5, but has recently expanded to serve children up to age 18.

In answer to questions from Commissioner Sorkin, Dr. Sanders confirmed that the RFP for promoting safe, stable homes will be issued at the end of January and will be effective July 1, 2005. Latino Family Preservation and Black Family Investment will continue;

both have been turned into case-carrying programs and are staffed at higher levels than before. The question, Dr. Sanders, is whether the approach should be limited to two relatively small programs in two offices, or used more broadly.

Commissioner Kleinberg expressed fears about divvying money up into the ‘silos’ of the four categories (plus any Casey support) because families could be forced to move from agency to agency as their service needs change.

If allegations are unfounded, Commissioner Fahey asked, how can family support services be imposed on families without the involvement of the department? Dr. Sanders drew the distinction between family support services and alternative-response family preservation services for ‘inconclusive’ cases. Family support can create an avenue for families to be referred. If community agencies engage families and provide something they find valuable, they will choose to get support. Commissioner Fahey suggested the use of a voluntary contract such as that used in family maintenance cases. If a family without an agreed-upon contract is threatened with removal, they may see going for help as an admission that could be used against them should there be another referral. A contract, Dr. Sanders said, turns it into something other than family support, since the intent is for families not to be involved with the department. It is a prevention strategy rather than an early intervention strategy.

The recurring mental health issue concerns Commissioner Sorkin—a contract with the Department of Mental Health is one thing, but access to services is another; some facilities are not accepting new cases or are restricting them to Medi-Cal patients. Too many children are seeing interns instead of fully trained mental health professionals, which Commissioner Kleinberg views as a deep problem.

Commissioner Kleinberg requested a Commission discussion about the increase in fatality reports on very young children. Seventy percent of deaths involve very young children, and 95 percent involve substance abuse on the part of caregivers, as well as gang deaths, stillbirths, and suffocations when babies share parents’ beds.

LEGISLATIVE UPDATE

Toni Hertz provided an update on the national Kinship Caregiver Support Act introduced by Senator Hillary Clinton on July 21, which—like California’s Kin-GAP program—would provide program subsidies for relative caregivers through Title IV-E funds, plus grants for kinship resource centers. Though it has received tremendous bipartisan support, the bill also has a big fiscal impact, which has kept it stalled in the Finance Committee. Action is expected next year. Vice Chair Biondi reported that the Children’s Defense Fund conference, ‘Dismantling the Cradle-to-Prison Pipeline,’ prepared resource materials about the Act and is hopeful about its passage.

According to Miriam Krinsky, the problem with relying on Kin-GAP for relative caregiver support is that it is funded by TANF, not Title IV-E, and relatives moving out of state cease to receive the subsidy. Kin-GAP also fails to provide for higher-rate children.

By the end of September in Sacramento, over 5,000 bills were introduced, 65 of which were tracked by the department's legislative section as being paramount to the welfare of children and families in Los Angeles County.

- SB 1612 restores the child welfare augmentation funds vetoed by the governor in the budget, which forestalled the potential loss of 120 staff in DCFS alone.
- AB 228 allows the sharing of records among the probate, family law, and dependency courts.
- AB 1986 extends the sunset date (to January 2010) on criminal record exemptions so that placements with relative caregivers can be expedited.
- AB 2795 extends the time allocated for family maintenance from six to twelve months (and possibly longer) if that is consistent with the family's attaining case plan goals.
- AB 2807, a clean-up of AB 408, mandates a plan for a significant adult to be identified for every child in a group home.
- SB 1357 permits foster caregivers to provide information and attend hearings about their foster children, and clarifies that youth may be present at their own proceedings. This bill also permits caregivers or members of the child's tribe to attend multidisciplinary hearings to provide input on the child.
- SB 1764 creates an immunization database for foster children so that when they change doctors they do not get duplicate immunizations.
- SB 1912 permits foster children to self-administer asthma medication at school with the permission of their foster parent.
- AB 44 cleans up the noticing requirements from AB 1956.
- AB 1413 reduces liability for parents who safely surrender their babies and for those who assist them.
- **AB** 1178 encourages the development of placements where pregnant and parenting teens and their babies can be together.
- AB 129 enables counties to pilot 'on-hold' or dual-jurisdiction models for the delinquency and dependency systems.
- AB 1913 tries to lessen delays in relative placements because of approval processes to ensure a child's immediate placement with relatives rather than strangers.
- AB 1858 puts in place more stringent accountability measures, certification procedures, and curriculum requirements for nonpublic schools, and makes it clear that group-home placement does not drive school placement.

- Other bills mandates car restraint systems for children to age 6 or until they weigh 60 pounds; allows out-of-state initial home studies to be accepted by public and private agencies for adoption purposes; and establishes a time limit to finalize adoptions ten days after the delivery of relinquishment paperwork by courier to the Department of Social Services, unless other legal issues are pending.

PUBLIC COMMENT

Evelyn Mason shared with Commissioners resources and information that she had obtained, including a kinship care directory and materials educating relatives and foster parents on medications, child behavior, and the health and education passport. She encouraged everyone to educate relatives to be strong advocates for children.

MEETING ADJOURNED